VI.5- Knowledge and Attitudes

There is a wide gap regarding the knowledge of the harmful effects of smoking on health between never smokers and current smokers where one-third of current smokers don't think that smoking is harmful to their health compared to only one-tenth of never smokers. This might lead to the conclusion that a large number of young people start smoking due to their ignorance of its consequences.

Another important implication of the data is exemplified by the fact that more current smokers have positive attitudes regarding smoking than never smokers, and more than one-quarter of never smokers think that boys and girls who smoke have more friends and look more attractive. Therefore, there is an urgent need for intervention to remove these misleading and false images of smokers that are usually promoted by the tobacco industry.

VI.6- Exposure to Media and advertising

Young people face enormous pressures to smoke at a time in their lives when they are most susceptible. The tobacco industry devotes an annual budget of nearly US\$ four billion to advertise and promote cigarettes. The results of this study provide a clear evidence that the majority of young people are bombarded with pro-tobacco messages. More than one-fourth of current smokers are offered free samples carrying cigarette brand logos on them and even offered free cigarettes which demonstrates a clear violation for the claimed responsibility of the tobacco industry concerning youth protection from smoking. In addition to that promoting tobacco through sports events and public entertainment poses the greatest threat for they associate a deadly habit with adventure and independence.

VI.7- Access and Availability

Young people, aged 13 -15 years, smoking at home, with or without their parents knowledge reveals the absence of a very important factor to prevent them from smoking; that is, parental guidance and objection to smoking. The ease at which young people can access cigarettes is yet another aspect that encourages those young people to smoke, and despite the fact that half of the current smokers can purchase cigarettes from stores, more than one third can have it for free, either borrow cigarettes from someone else (18.2%), steal it (7.8%) or get it from an older person (6.7%).

VII- Conclusion

The tobacco industry is threatening our youth on all aspects, they package death as life, disease as health and deadly addiction as the taste of freedom and a celebration of life.

Starting smoking at a relatively young age increases the risk of addiction to smoking and consequently increases the risk of death from a smoking-related cause. Among those who smoke throughout their lives, about half can be expected to die from a smoking-related disease, with half of those deaths occurring in middle age. Smoking is one of the major risk factors and causal agent in at least six of the devastating chronic diseases: heart disease, cancer, cerebrovascular diseases, diabetes mellitus, chronic obstructive pulmonary diseases and atherosclerosis.

The prevalence rates of tobacco use presented in this report are alarming, especially if we consider that those children and young adults should have invested their time and energy in other productive and life enhancing activities instead of deteriorating their health through addiction and diseases. This study provides key intervening variables, such as knowledge, attitudes and beliefs on behavioral norms with regard to tobacco use among young people which can be used in prevention programs. It also assesses the extent to which current prevention programs, such as banning smoking in schools, heath awareness campaigns and extracurricular health activities are reaching school students and affecting youth behavior.

VIII- Recommendations

Young people are a strategically important market for the tobacco industry. Since most smokers try their first cigarette before the age of eighteen, young people are the chief source of new consumers for the tobacco industry, which each year must replace the consumers who quit smoking or die of smoking-related diseases.

Adolescents and school-aged children should be a primary focus for intervention strategies. Even a small decline in smoking prevalence among youth will have a significant beneficial public health impact in reducing the number of adult smokers and consequently reducing morbidity and mortality caused by smoking related diseases in the future. Prevention programs should identify key personal, social and environmental risk factors and act accordingly to prevent adolescents from starting smoking and reducing adolescent tobacco use.

The nature of the tobacco use epidemic requires a comprehensive prevention intervention plan focusing on the community as well as schools in order to achieve the following:

- Reducing exposure to environmental tobacco smoke through banning all forms of tobacco use on school grounds and public places.
- Reducing youth access to tobacco products through issuing laws and regulations to reduce illegal tobacco sales to under 18 of age.
- Promoting tobacco cessation through school-based adolescent-tailored counseling programs an nationwide telephone counseling programs.

- Reducing adolescents exposure to misleading and faulty tobacco industry
 advertisements through banning tobacco use advertisement in mass media and stop all
 forms of tobacco promotion, such as sponsoring sports and cultural events,
 distributing items carrying tobacco brands logos on them and offering cigarettes to
 minors.
- Changing community norms regarding tobacco use through increasing public awareness about the harmful health consequences of tobacco use and the addictive nature of smoking. Moreover, we should focus on youth by designing classroom instructions geared towards tobacco use prevention and organize school wide tobacco prevention events.

It is recommended that this study should be conducted at regular time intervals to become a surveillance system and function as an evaluation tool for current and prospective smoking prevention programs. Moreover, other in-depth studies are needed to determine the effectiveness of prevention activities.

The tobacco use epidemic will perish when young people no longer want to smoke. This is our challenge and mission at the same time.

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Note: The analysis, interpretations, conclusions and recommendations presented in this report are those of the authors and not the Ministry of Health in the United Arab Emirates.

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Bassam H. Abi Saab was the National Coordinator and Scientific director of the survey. The OSH/CDC designed the study. Bassam Abi Saab, Dr. Ramadan Al Tayeb, Ms. Huda Shaheen, Ms. Fatima Hassan, and Ms. Mouza Al Khayal supervised the data collection. Bassam Abi Saab, Dr. Charles W. Warren, Mr. Curtis Blanton, Ms. Stephanie Staras and Ms. Juliette Lee contributed to the data analysis and interpretation of the data. Mr. Bassam Abi Saab wrote the report with contributions from HE Dr. Mahmoud Fikri, Dr. Charles W. Warren, Dr. Abdul Monim Noor and Dr. Ramadan Al Tayeb. Aisha M'hmd Khouri typed the report and Khaled M'hmd Salah El Din designed the cover pages.